## BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
(Column 1) (Colu						nn 2)	٦	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS							-	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			7 ( minus 20=		. 6			X\$ 9=	54	OR	X\$18= `	108
INDEPENDENT CLAIMS			3 min	us 3 =	•		ı	X40=	<i>i</i>	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL	410G	OR	TOTAL	318	
CLAIMS AS AMENDED - PART II								•	V		OTHER	
(Column 1) (Column 2) (Column 3)							_	SMALLE	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 26	Minus	** 6	26	= -		X\$ 9=		OR	X\$18=	
	Independent	· 3	Minus	TAID TAI	<u>ک</u>	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MI	JUIPLE DEP	ENDEN	CLAIM			+135=		OR	+2:70=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING - AFTER AMENDMENT		HIGI NUM PREVI	HEST IBER OUSLY - FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		-RATE_	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T 01 4114	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							İ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	1	HIG NUM PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA	Pr.	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		<i>21</i>	™ X80=	
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT C						]	7402		OR	, 2000-	<u> </u>
								+135=		OR	+270=	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Il line at Number Previously Paid For" (Total or Independent) in the highest number (ound in the appropriate having column 1.											